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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/077,215-Conf. #3067
Filing Date	February 15, 2002
First Named Inventor	Norman Szalony
Title	SHAFT TO TRANSFER TORQUE IN A VEHICLE
Art Unit	3616
Examiner Name	Toan C. To
Attorney Docket No.	31310/30009

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number: 04743

OR

Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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-------------------------	--

Address

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Date

2/27/01

Name

Keith Sanford

Telephone

610-705-8553

Title and Company

Executive Vice President, Sales & Engineering, Neapco Drivelines, LLC

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.